# 4031224920

**FEC** FORM 3

Only

FE5AN018

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

RECEIVED

2014 APR 23 AM 11: 29

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1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typing the lines.		12FE4M5		E Lay
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ADDRESS (number and street)	821 010	d Leix	ingsto	N Rd.			
Check if different							
Check if different than previously reported. (ACC)	Leeswill	lilie I I			الايط الأ	290170-	75.9.6
2. FEC IDENTIFICATION NU	JMBER ▼	CITY		S	STATE A	ZIP CODE	
gramming and specific and speci	<b>3</b> . €	IS THIS REPORT	NEW (N)	OR S	AMEND (A)		DISTRICT
4. TYPE OF REPORT (Choc  (a) Quarterly Reports:  April 15 Quarterly Re  July 15 Quarterly Re  October 15 Quarterl  January 31 Year-End  Termination Report	Report (Q1) eport (Q2) ly Report (Q3) d Report (YE) (c)	Election on	Primary (12P) Convention (12P) Convention (12P) F-Election Report (30G)	DOOR for the:	General (12 Special (12 Special (12 Runoff (30	in the State of	pecial (30S)
5. Covering Period	2 2 2 2 2 2	VI 3	through	Ö.3	1 3 0 /	Ž 0 1 4	
I certify that I have examined the		1	owledge and l	belief it is tru	e, correct and	complete.	
Type or Print Name of Treasurer	Jerry 10.	. 1 · · ·	UNDUST	<u> </u>	Jun and the		<b>Co</b> ûrisikkaîsl
Signature of Treasurer	cyl. To	Had		Da	ate 6 7	11.2 2	6/4
NOTE: Submission of false, errone	Bous, or incomplete info	ormation may	subject the per	son signing th	nis Report to th	e penalties of 2 U	.S.C. §437g.
Office Use Only						FEC FORI	

	SUMMARY PAGE
FEC Form 3 (Revised 02/2003)	of Receipts and Disbursem

of Receipts and Disbursements

Page 2

MECAIN FOR CONGRESS

Report Covering the Period:

08 2013

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	3 9 5 0 a	7.698.68
	(b) Total Contribution Refunds (from Line 20(d))	00000000000000000000000000000000000000	000000
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	7.69868
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	Sandrado en 1 a de trocado de transfer de la composição d	7,215.68
	(b) Total Offsets to Operating Expenditures (from Line 14)	00000	UP.00.0
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	process and the second	721568
8.	Cash on Hand at Close of Reporting Period (from Line 27)	g samen samen; mangar samen ga mangar mangaran ng mangaran na nagaran na nagaran na nagaran na na nagaran na n Samen samen na	
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0000	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Sohedule D)	process of management growing section	

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE5AN018

# ব 40312

#### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name Mª-CAIN FOR CONGLESS

Report Covering the Period:

03 20 2013

03/31/2014

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	in the second se	2445.00
	(ii) Unitemized  (iii) TOTAL of contributions from individuals	Secretary for some of the secretary and the secr	
	(b) Political Party Committees(c) Other Political Committees (such as PACs)		
	(d) The Candidate	1454500 454500	1445.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	The contract of the contract o	
 13.	LOANS:		
	(a) Made or Guarenteed by the Candidate		
	(b) All Other Loans(c) TOTAL LOANS (add Lines 13(a) and (b))	জন্ম কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব	mental from the cost to marking and transfer and transfer and the marking and the cost of
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	granisatus arganisas, etc. 700 sargar arganisas, para arganisas, para arganisas, para arganisas, para arganisas, p	gamental gament gam Gament gament gamen
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	management generally with the following the second general gen	gan sa digeneración de la companya del companya de la companya de la companya del companya de la companya del la companya del la companya de
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	45.00	7,44500

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ements Page 4

FEC FORM 3 (Revised 02/2003)		Page 4
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES		17094
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		00000
19. LOAN REPAYMENTS:  (a) Of Loans Made or Guaranteed  by the Candidate		
(b) Of All Other Loans(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))		000000
20. REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other  Than Political Committees		000000
(b) Political Party Committees(c) Other Political Committees (such as PACs)	(1/2/10/10	000000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		000000
21. OTHER DISBURSEMENTS		000000
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21)	• 413488	900000 917094
III. CASH	SUMMARY	_
23. CASH ON HAND AT BEGINNING OF RE	PORTING PERIOD	6643
24 TOTAL RECEIPTS THIS PERIOD (from L	ine 16, page 3)	454500
25. SUBTOTAL (add Line 23 and Line 24)		455143
26. TOTAL DISBURSEMENTS THIS PERIOD	(from Line 22)	413488
27. CASH ON HAND AT CLOSE OF REPOR (subtract Line 26 from Line 25)	TING PERIOD	48655

### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

**PAGE** OF 2 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the <u>X</u> 11a 11b 11c 11d **Detailed Summary Page** 13a Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. MECHN For Congress Full Name (Last, First, Middle Initial)

McLain Beverly Mailing Address City Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) WRIGHT, CURTIS Date of Receipt Mailing Address City Zip Code CAYCC FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Refired U.S. ARMY Receipt For: Election Cycle-to-Date X Primary General Other (specify) all or discretional water the sale of the Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code 41CAGU FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation U.5. Gout Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

PAGE 7 FOR LINE NUMBER: OF 2 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 11d **Detailed Summary Page** 12 13a Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City Zip Code FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date ✓ Primary Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Addre State City Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employe Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Election Cycle-to-Date Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE / OF 3
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	ny information copied from such Reports and St for commercial purcoses, other than using the			
	NAME OF COMMITTEE (In Full)  £ ddi£ M.C. Call	v Fr	- Cangress	
Α.	Full Name (Last, First, Middle Initial)	· · · ·		Date of Receipt
	Mailing Address  821 Old Lexington  City  Lecsu//e	Rd. State	Zip Code	03/20/3
	Lecsu//e FEC ID number of contributing	Personal Security Sec	29010	
	federal political committee.	C	***** จากเหมืองกระจะเร็จ เมษาเหมือง คระจะเพื่อแบบเหมือง เกราะเพื่อ	Amount of Each Receipt this Period
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	Full Name (Last, First, Middle Initial)			Date of Receipt
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	FEC ID number of contributing federal political committee.	C	2 4010 respect e granding reaching reach so man g	Amount of Each Receipt this Period
	Name of Employer U.S. ALMY	Occupation	ired	the continue of the continue o
	Receipt For:    X   Primary   General     Other (specify)	Tacindaria Maria	ycle-to-Date เกราะสายและสุดเลยายุขายเกราะสายสายสายสุดเลยสุดเลยสาย เหมือนเกราะสายเล่าสิงเลย สายเลยสายสายสายสายสายสายสายสายสาย	
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C.	Mailing Address 821 Old Lexi'N City LeesVille	State	Zip Code	11/26/2013
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
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	Receipt For:  Primary General  Other (specify)	Arria farestita	ycle-to-Date	
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	Full Name (Last, First, Middle Initial)		·	
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	Name of Employer	Occupation	ticel	Survey Some subsection de service
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	Primary General Other (specify)		त्रापु करत त्यापु <b>राज्याव्याप्रकार का सुरस्मात्राक्ष्यात्र क</b> रता हुन करवास्त्राप्रकार स्थानक स्थानक स्थानक स्था सुर राज्यों कर पर रोज्या स्थानक स्थान	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
3.	Mailing Address	1. 1	) <i>[</i>	12 69 2013
	SZI OLA LEXINGT City Lecsulle	State	7. Zip Code 29818	<u> </u>
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SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 3 OF 3 (check only one)			
ITEMIZED RECEIPTS	for each category of the  Detailed Sumrtary Page	11a 11b 11c X 11d			
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Full Name (Last, First, Middle Initial)					
Mailing Address 821 Old Lexing	tun Rd. State Zip Code	Date of Receipt    03			
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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBE	ER:	PAGE /	OF 23
(check only one)			
<b>X</b> 17	18	19a	19
20a	20b	20c	21

I LEWIZED DISBURSEMENTS	Detailed Summary Page	20a	18 20b	19a 20c	19b
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		erson for the purpo	ose of solic	iting contrib	butions
NAME OF COMMITTEE (In Full)  Eddie M=Cain For			<u> </u>		-
Full Name (Last, First, Middle Initial)  A. Minuteman Dress  Mailing Address  City State  Purpose of Disbursement  Candidate Name  Solice McCoin  Office Sought: X House Senate Prima	Zip Code 29072 Category/ Type	Date of Disbu	ch Disburs		
Full Name (Last, First, Middle Initial)  B. OFFILE DEPOT  Mailing, Address  City State	,	Date of Disbu		201	3
Purpose of Disbursement  Priving Copies  Candidate Name  Edic M-Coll  Office Sought: X House Senate President  State: S.C., District: 2		Amount of Ea			
Full Name (Last, First, Middle Initial)  C. Mintener 1055  Mailing Address  City State  LKINSTON  Purpose of Disbursement  Candidate Name  Senate  President  Prima  Other		Date of Disbu	ich Disburs	ement this	
State: 5 C District: 2  SUBTOTAL of Disbursements This Page (optional)				7.1.2. 7.1.2.	67

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) (check only one) for each category of the Detailed Summary Page 17 17 18 19a 20a 20b 20c 17		FOR LINE NUMBER	i: [	PAGE 2	OF 2
	for each category of the	<b>[</b> ]	18	— <b>⊢</b> —	$\Box$ 1
		20a	200	20c	1_12

9b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political nommittee to solicit contributions from such committee. Date of Disbursement Zip Code Amount of Each Disbursement this Period 29016 Purpose of Disbursement 002 Category/ M. Cain Type Disbursement For: House Senate Primary General Other (specify) President Date of Disbursement Zip Code Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: Senate Primary General President Other (specify) Date of Disbursement C. Zip Code Amount of Each Disbursement this Period 29bIO 002 Candidate Name Category/ Type Office Sought: Disbursement For: Primary General Senate President Other (specify) State: 5 District: 2 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULI	EB	(FEC	Form	3)
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OF 23 PAGE 3 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 7 17 18 19a 19b Detailed Summary Page 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Date of Disbursement City Zip Code Amount of Each Disbursement this Period ent fin an old sense 002 Category/ Type Disbursement For: Office Sought: House Primary Senate General President Other (specify) District: 2 State: 5C Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Add Zip Code Amount of Each Disbursement this Period 002 Candidate Name Category/ Type Disbursement For: Primary General Senate President Other (specify) District: 2 Date of Disbursement C. Mailing Add City Amount of Each Disbursement this Period 002 Category/ Type Disbursement For: Senate **Primary** General Other (specify) President State: S L District: 2 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE B (FEC Form 3)

Use separate schedule(s)

FOR LIN	E NUMBE	R: LP	AGE EP	OF 23
(check o	nly one)			
[3	17	18	19a	19b
[	20a	20b	20c	21

ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X   17   18   19a   19b   20a   20b   20c   21
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a	ay not be sold or used by any ddress of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Eddie Michael For Cana	01:55	
Full Name (Last, First, Middle Initial)  A.   Mailing Address  Action Address		Date of Disbursement
City  City  Purpose of Disbursement  Candidate Name  Senate  President  State  State  State  State  State  State  State  State  State  Candidate Name  Primary  Other (sp.	General	্বিলাগুল বিশ্বস্থা কৰিল কৰিছে। বিশ্বস্থা কৰিলে
B. Place (Last, First, Middle Initial)  B. Place Flow Express  Mailing Address  3866 Hwy 378  City State  Lecs VII/C SC  Purpose of Disbursement  Candidate Name  Candidate Name  Condidate Na	Zip Code 29010  Zip Code Category Type  General	Consentingue of many transmission of the second sec
State: 3 C District: 2  Full Name (Last, First, Middle Initial)	pecify)	Date of Disbursement
Mailing Address  Tol N. Lake DR  City State Zip  Purpose of Disbursement  ATM FEF For Ballance Torm  Candidate Name  Office Sought: X House Senate Primary  President Other (specific control of the cont	Category Type  General	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)		96196

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 5 OF 23 Use separate schedule(s) (check only one) for each category of the 18 19a 19b **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Date of Disbursement Mailing Add City Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 002 Candidate\_Name Mª CAIN Category/ Type Disbursement For: House Office Sought: Senate Primary General Other (specify) President Date of Disbursement City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 004 Candidate Nav Category/ Type Disbursement For: House Senate Primary General President Other (specify) Date of Disbursement C. Mailing Add Zip Code City Amount of Each Disbursement this Period Purpose of Dispursement Candidate Name Category/ Type Disbursement For: Office Sought: Primary General Senate Other (specify) President State: 5 C District: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 23 (check only one)  X 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and.	nay not be sold or used by any address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Eddie Michael For Co.	Ngreis	
Full Name (Last, First, Middle Initial)  A.  Mailing Address  Colhabia  AV	·	Date of Disbursement
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SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF 23 (check only one)
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### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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OF 23

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# SCHEDULE B (FEC Form 3)

PAGE 2 OF 23 FOR LINE NUMBER: Use separate schedule(s) (check only one)

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#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 10 OF 23 Use separate schedule(s) (check only one) for each category of the 18 19a 19b **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Add City Amount of Each Disbursement this Period Purpose of Disburseme 002 Candidate Name Category/ Mª CAIN Type Disbursement For: Office Sought: House Primary Senate General President Other (specify) District: 2 Date of Disbursement Zip Code Amount of Each Disbursement this Period 006 Candidate Na Category/ Type Office Sought: Disbursement For: House Primary Senate General President Other (specify) Date of Disbursement Mailing Address Zip\_Code City Amount of Each Disbursement this Period Purpose of Disbursement 0,62 Candidate Name Category/ Type Office Sought: House Senate Primary General

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### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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# SCHEDULE B (FEC Form 3)

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Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and.	nay not be sold or address of any poli	used by any p	person for the purpose of soliciting contributions be to solicit contributions from such committee.
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### SCHEDULE B (FEC Form 3)

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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Any information copied from such Reports and Statement or for commercial purposes, other than using the name a	ts may not be sold or used by any and address of any political committe	person for the purpose of soliciting contributions see to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Eddie McCaln Fur	Congress	
A.  Mailing Address  City  State  Purpose of Disbursement  Candidate Name  Candidate Name  Candidate Name  A.  Disbursement  Candidate Name  C	Zip Code  Zip Code  Category/ Type  For:	Date of Disbursement  O 3 2014  Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial)  A. ACE OF SAIFS  Mailing Address		Date of Disbursement
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### SCHEDULE B (FEC Form 3)

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 2.3 (check only one)
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NAME OF COMMITTEE (In Full)  Eddie M. CAN For.		
Full Name (Last, First, Middle Initial)  A. Linkedin	,	Date of Disbursement
Mailing Address		03/20/12014
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Candidate Name / Wice Mic Colw	- 74.6	Category/		
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NAME OF COMMITTEE (ID FUI)  Eddie Mª COSW Fur	Cungiess	
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address 633 Columbia M	5 I V.	03 20 2014
City Lexington State	Zip Code 9012	Amount of Each Disbursement this Period
Candidate Name  Office Sought:  New York Senate  Purpose of Disbursement  AMPAIGN  Finding  Disbursement Form  Senate  Primary	Category, Type	ราชาว เกิดแก่การครับ และเรียวและ ข้า และเคมี่ เพลิสัยเกิด เพลิสัยเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิด
State: 5 C District: 2 Other (s	L	
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Purpose of Disbursement  MAILUM †  Candidate Name Addie ME CAN	Category, Type	र्वेद्धान्त्रकारीय प्राप्तकारीय प्राप्तकारीय प्राप्तकारीय प्राप्तकारीय प्राप्तकारीय प्राप्तकारीय प्राप्तकारीय विकास प्राप्तकारीय विकास के क्षित्रकारीय विकास के किस्सान के किस्सान के किस्सान के किस्सान के किस्सान के किस्स
Office Sought:    House   Disbursement Form   Primary	General	
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address 3860 Hwy 378		03 137 2014
City State Zij	Code 29018	Amount of Each Disbursement this Period
Purpose of Disbursement	Category	3502
Office Sought:  House  Senate  President  State:  Disbursement Formary  Other (s	Type:	
SUBTOTAL of Disbursements This Page (optional)		processing the second s
TOTAL This Period (last page this line number only)		6,127.35

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SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 OF23 (check only one)		
ITEMIZED DISBURSEMENTS	for each category of the	17 18 19a 19b		
<del></del>	Detailed Summary Page			
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NAME OF COMMITTEE (In Full)				
Eddie Mª CAIN FOI	Congress			
Full Name (Last, First, Middle Initial)	•	Date of Dichurament		
A. PALMETTO EXPICSS		Date of Disbursement		
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